Statement of Representative Tom Osborne (R-NE) Before the House Committee on Veterans' Affairs Project HERO March 29, 2006

Mr. Chairman and Members of the Committee, thank you for holding a hearing on improving and enhancing access to quality care for our nation's veterans through care coordination demonstrations. I appreciate the Committee providing me with the opportunity to testify about veterans' access to care. I would like to thank the Chairman for his leadership on this very important issue.

Access to health care is one of the greatest obstacles facing veterans in my district, the Third District of Nebraska, as well as many veterans across the nation. Nebraska's Third District encompasses 64,000 miles, most of which I have driven. Now compare that to the total mileage veterans in Veterans Integrated Service Network (VISN) 23 travel. The VISN 23 service area exceeds 390,000 square miles and includes Iowa, Minnesota, Nebraska, North Dakota, and South Dakota, and portions of the states of Illinois, Kansas, Missouri, Wisconsin, and Wyoming. Veterans in VISN 23 are traveling thousands of miles for medical care.

At each stop I make in my district, veterans continue to express to me their concern about traveling hours for medical care. Many travel one to two hours to receive primary medical care, while some veterans who live in the western part of Nebraska must travel at least four days in order to have testing done in Omaha at the veteran's hospital. For example, a veteran who lives in Ainsworth, Nebraska must travel almost 4 hours to Grand Island where they catch a van, and then drive an additional 160 miles, almost 3 hours, to Omaha.

Many veterans in my district are elderly and encounter difficulty, or find it impossible, to travel long distances to receive health care. If a veteran has to cancel an appointment, it may take months to reschedule. Because of the difficulties in obtaining care, many veterans put off preventative and even necessary treatment, which results in poorer health and eventually increased costs in health care.

I recently received a letter from the widow of a World War II veteran who resides in my district. Her husband had served 44 months in the

military, including 39 months overseas during World War II. In recent years this veteran suffered from poor circulation and lung problems as a result of the years spent serving his country. Because of this man's poor health condition and physical limitations, and the distance he lived from a VA medical facility, he was not able to travel the great distance necessary to access the care he needed on a regular basis. He passed away in a local community hospital in 2005. This is unacceptable given the medical capabilities we have available today.

Most veterans in Nebraska appreciate and are satisfied with the services and care they receive at VA facilities. However, traveling great distances through inclement weather, such as the snowstorm that dropped two feet of snow in parts of Nebraska last week, is dangerous and physically taxing for many veterans; particularly when we have high quality health care facilities in many parts of the state.

After looking at various options to address these problems, I introduced H.R. 1741, the Rural Veterans Access to Care Act. H.R. 1741 would establish a pilot program to assist highly rural or geographically remote veterans who are enrolled in the VA in obtaining primary health care at a medical facility closer to home. The legislation requires the Secretary of the VA to use the authority to contract with non-Department facilities in order to furnish routine medical services to enrolled veterans who are classified as highly rural or geographically remote.

I believe VISN-wide care coordination demonstrations will address many of the issues that my legislation is intended to address with regard to access to care. Veterans nationwide, not only those living in geographically remote areas, will receive more effective and efficient care through these demonstrations. These veterans would be able to access health care in a more timely fashion, instead of waiting six months to one year for an appointment for routine medical care. They would also be closer to their health care providers, rather than traveling hundreds of miles, sometimes through inclement weather, for an appointment with the VA.

Although I believe the demonstrations can be an effective way to provide reliable, quality care to veterans in these areas, I understand that the contracts have not yet been written and all the demonstration requirements have not yet been completely defined. However, I hope today's hearing will provide a valuable opportunity for everyone to get a better sense of what can

be accomplished through the demonstrations and give the department a greater sense of what veteran needs can and should be addressed through the demos.

While I believe it is critically important to provide additional access points throughout the Veterans Integrated Service Networks that have been selected for the demonstration, I think we should also demand that quality standards be effectively maintained. After all, my interest, like yours Mr. Chairman, is to provide timely, quality care to those who have served and are eligible for VA care.

Once again, I would like to thank the Chairman for the opportunity to appear before the Committee as it explores greater access to quality care for veterans. It is important for us to consider the hardships that our veterans have faced while serving our country. The older men and women among them are in the twilight of their lives and need medical services that can be provided closer to home. Many of them made huge sacrifices on our behalf to defend our great country and I believe it is time that we improve their access to health care. I look forward to working with everyone on this committee, and those in the VA, so that together we can fashion a demonstration project that responds to the geographical and clinical needs of our nation's veterans.

Again, thank you for giving me the opportunity to provide my testimony on this very important issue.